State Advisory Council on Quality Care at the End of Life Minutes from December 14, 2007 Meeting

Meeting time and place: December 14, 2007, 10:00 a.m., in the Department of Aging's Conference Room, 301 West Preston Street, Room 1007.

Council members present: Cynda Rushton, Chair; Catherine Boyne; Karen Kauffman; Timothy Keay; Wendy Kronmiller (Secretary of Health and Mental Hygiene's designee); Mike Lachance (Secretary of Aging's designee); Steve Levenson; Ted Meyerson; Jack Schwartz (Attorney General's designee); Catherine Stavely.

Others present: Barbara Blaylock; Harold Bob; Elena Boisvert; Jim DeBoy; Danny Glazer; Teresa Jeter-Cuting; Kathleen Izdebski; Leslie Piet; Gloria Ramsey; Kelley Ray; Paige Sweeney; William Vaughan; Renee Webster.

Dr. Rushton convened the meeting at 10:00 and welcomed Council members and guests.

The first portion of the meeting was devoted to current items of interest raised by Council members and guests.

- Ms. Stavely indicated that, on National Health Care Decisions Day, April 16, 2008, the Elder Law Section of the Maryland State Bar Association hopes to promote at least one program by an elder law attorney in each county.
- Dr. Blaylock informed the Council that the Montgomery County coalition which had spearheaded similar efforts in 2006 was planning events for April 16. The coalition had also sought feedback from its 2006 activities, and one point that emerged had to do with advance directive materials for those whose native language is not English. A word-for-word translation of standard materials is not sufficient. Therefore, the coalition is looking to adapt a lower literacy level advance directive from California, which has been translated into Spanish and other languages.
- Ms. Kronmiller reported on her office's efforts to more effectively integrate evidence of compliance with the Health Care Decisions Act into the Joint Commission's accreditation process. She urged that Council members and others who were aware of problems or concerns in Joint Commission-accredited facilities bring them to her attention.

- Dr. Keay reported on an effort to get state medical licensing boards to endorse a publication on "responsible prescribing of opoioids." At a future meeting, the Council may wish to discuss pursuing this matter in Maryland.
- Dr. Rushton informed the Council of a research project about advance directives led by Dr. Dan Morhaim, an emergency room physician and member of the General Assembly. The research involves a survey on advance directive use and implementation and interviews of personnel at various health care institutions. Dr. Rushton encouraged participation if any Council members are asked to do so. The data will potentially be important to future Council initiatives.
- Mr. Schwartz reported on a session that he attended in New Orleans involving the states that have adopted the Physician's Order for Life-Sustaining Treatment (POLST) or have begun the process of doing so. Due to this meeting's lengthy agenda, a discussion of POLST will be reserved for a future meeting.
- Mr. Schwartz distributed two articles of interest, one by Laje et al., "The Maryland Patient Plan of Care Form: Perceptions of Physicians and Social Workers," the other by Appelbaum, "Assessment of Patients' Competence to Consent to Treatment."

Mr. Schwartz then solicited Council advice about the Instructions on Current Life-Sustaining Treatment Options Form. Following the requirement of the law, the new form and accompanying regulations were published for comment in late November; the comment period runs out on December 26. Mr. Schwartz asked the Council what it regarded as a reasonable date for implementation of the new form (assuming that public comments are not substantive enough to require republication). **Council action:** After discussion and by consensus, the Council recommended that the new form come into use on April 1, 2008.

Ms. Kronmiller, Mr. Vaughan, and Ms. Webster then led a discussion about the use of color-coded wrist bands, in particular as a signal of code status. Problems have been identified, especially in transfer cases, if facilities have differing color schemes. Hence, there is some movement across the country to standardize color coding. Much discussion followed about the use of color coding, patient privacy, and the effect on use of EMS/DNR orders. Members and guests commented on the risks of any mandatory color coding scheme but also the need for consistency if color coding is used voluntarily by facilities. Council action: After discussion and by consensus, the Council requested that

the Office of Health Care Quality further research the issue and, in doing so, involve the Maryland Hospital Association and representatives of the nursing home associations.

Mr. Schwartz then asked whether the Council wished to take a position on a bill to add the Secretary of Disabilities to the list of *ex officio* Council members. **Council action:** After discussion and by approved motion, the Council unanimously supported the legislative proposal.

The next item was a summary by Mr. Schwartz of his proposal for legislation that facilities be required to disclose key elements of their procedures on the use of life-sustaining treatments. The proposed bill would require the following public disclosure: (1) how patient preferences are elicited and documented as a basis for decision making about life-sustaining procedures during the current admission; (2) how facility procedures enable medical orders to be aligned with patient preferences about life-sustaining procedures; and (3) how facilities measure relevant outcomes. Discussion by Council members followed about what should be included in the disclosures and how compliance would be addressed. Members were asked to reflect on the wording and e-mail their suggestions by the first week in January. Based on these comments, another draft will be circulated.

Mr. Schwartz then explained the process for completion of the pediatric palliative care report, which will be submitted on January 31. He outlined in particular the section on policy recommendations and invited comments by e-mail.

The last item was a presentation by Gloria Ramsey, JD, RN, of the Uniformed Services University of the Health Sciences, on issues in end-of-life care for racially and ethnically diverse populations. The presentation was aimed at laying a foundation for discussion on how the Council might get started on a useful public policy or educational initiative to improve care. Council members thanked Ms. Ramsey for the excellent presentation, and Mr. Schwartz indicated that the slides would be posted on the Council's web page.

The Council set its next meeting for Friday, February 29, 2008, at 10:00 at the Department of Aging.

No further items of business having been presented, Dr. Rushton adjourned the meeting at 12:05.